

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	10385	
O.I.P.E. CLASSIFIER		49	10/19/00
FORMALITY REVIEW		823	11/09
RESPONSE FORMALITY REVIEW		676	09/28/01

09-676296

# INDEX OF CLAIMS

Rejected N Non-elected  
 Allowed I Interference  
 Canceled A Appeal  
 Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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